

Individual On-site Wastewater System

Notice of Intent to Install a New System or Request for Inspection of Existing System

APPLICANT INFORMATION - How can we contact you?

Applicant Name:		Applicant Phone:	
Mailing Address:		Alternate Phone:	
City, State, Zip		Fax Number:	
Results Disposition	Mailed <input type="checkbox"/>	Pick Up <input type="checkbox"/>	Phone <input type="checkbox"/>
	Other <input type="checkbox"/> Specify:		

PROPERTY INFORMATION - How can we get there?

Property Address: (Street Number and Name)		City:	
Subdivision:		Lot Number:	
Lot Size:	(Acres, SqFt, or Dimensions)		County:
Legal Description:	Sec.	Town.	Range
	Drinking Water: Public <input type="checkbox"/> Private <input type="checkbox"/>		
Directions to Property:			

CONSTRUCTION INFORMATION - What will we find there? What is going to be built there?

Type of Dwelling:	Residence <input type="checkbox"/> Commercial <input type="checkbox"/> Other <input type="checkbox"/>	Specify:	
Construction:	New <input type="checkbox"/> Existing <input type="checkbox"/> Vacant <input type="checkbox"/>	Number of Bedrooms:	(Residence)
Size of Dwelling:	Square Feet	Number of Occupants:	(Residence)
External Features:	Swimming Pool <input type="checkbox"/> Separate Garage <input type="checkbox"/> Shed or Shop <input type="checkbox"/> Paved Parking /Driveway <input type="checkbox"/>		

AUTHORIZATION AND SIGNATURE - Your approval for the inspection

I hereby request, as owner or agent for owner, a representative of the Mississippi State Department of Health to conduct a soil and site evaluation or inspection of the property detailed above and to enter on this property for that purpose.	
Signature:	Date:

Instructions for Individual On-site Wastewater Form

WHAT TO DO WITH THE FORM

1. Complete the form as instructed below.
2. Attach a legal description of the property.
3. Attach a Plot Plan, showing lot lines, dwelling and all external features on the property, drawn to scale.
4. For an existing system, complete a notarized affidavit describing known components of the system. Health Department Form Number 776 should be used for this purpose.
5. An existing ATU (Treatment Plant) must be certified by an authorized factory representative using Form Number 777.
5. Attach a check in the amount of \$50.00 made payable to the Health Department.
6. Mail or bring all documents to the county Health Department in which the property is located.

WHAT TO DO WITH YOUR PROPERTY

1. By signing the Form you give permission for us to enter your property. If you have animals or any other circumstances we should be aware of, please detail these in the Directions Box of the Form.
2. For new construction, all lot lines should be visible and marked. The location of the dwelling should also be clearly marked. The property should be cleared sufficiently to allow us to view the contours of the property.
3. If there is a private water well, its proposed location should be marked.

HOW TO COMPLETE THE FORM

Applicant Name:	Name of owner of property or other authorized individual.
Mail Address:	Current mailing address of owner, NOT THE PROPERTY TO BE INSPECTED.
Applicant Phone:	Optional
Alternate Phone:	Optional
Fax Number:	Optional
Results Disposition	Check one option for your results, if none are checked, results will be mailed.
Property Street:	The address including street number of the property. Get the 911 address from the County.
Subdivision:	If the property is in a platted subdivision, give us the name.
Lot Number:	If the property is in a platted subdivision, give us the lot number.
Lot Size:	Give us the lot size in either acres, square feet or dimensions.
County:	County is important. This form must be filed in the county in which the property is located.
Legal Description:	Can be obtained from deed or county court house. We want Section, Township and Range.
Drinking Water:	Tell us if the property is served by a public water system or it will have a private well.
Directions:	Give us reasonable driving directions to the property.
Type of Dwelling:	Check if residence or commercial establishment. If neither, check other and specify.
Construction:	Check if new construction or existing building, if existing, check if vacant.
Size of Dwelling:	Give us the size of the dwelling when construction is completed in square feet.
Number Bedrooms:	Give us the number of bedrooms if a residence, leave blank for other building types.
Number Occupants:	Give us the number of occupants if a residence, leave blank for other building types.
External Features:	Check all external features to be built on the property.

Checklist

Required: ☐ Completed Form ☐ Legal Description ☐ Plot Plan ☐ Fee
Extra: ☐ Homeowner Affidavit ☐ ATU Inspection ☐ Easement ☐ Disclaimer